

POLICY DOCUMENT



TAYSIDE POLICE

POLICY

HEALTH AND SAFETY

Effective Date:	16 June 2006
Review Date:	June 2009
Owning Department:	HQ – Corporate Services
Author:	Stan Brown

POLICY DOCUMENT

TAYSIDE POLICE HEALTH AND SAFETY POLICY

Contents

		Page
1	General Statement	
2	Organisation/ Responsibilities	
3	Arrangements	
4	Safety Representatives	
Appendix 1	Accidents Procedures	
Appendix 2	Reporting of Injuries	
Appendix 3	Duties of Designated Staff	
Appendix 4	Fire Evacuation Procedures	

All associated Health and Safety instruction will be made available in Guidance format.

POLICY DOCUMENT

1. GENERAL STATEMENT

1.1 The Chief Constable and Joint Police Board

attach the greatest importance to safeguarding the health and safety of all Force Personnel. They regard the promotion of health and safety as a mutual objective for management and employees at all levels.

It is the policy of the Force:

To provide adequate finance and physical resources to control workplace hazards by risk assessments and establishing risk control measures.

The Force recognises that accidents, ill health and incidents may result from failings in management control and are not necessarily the fault of individual employees.

The Assistant Chief Constable has overall responsibility for health and safety. The Force is committed to pursuing progressive improvements in health and safety performance, reducing injuries and ill health and aligning these will assist in achieving other business objectives and legal requirement defines the minimum level of achievement for this.

The Force has established effective systems of communication with employees who are a key resource and recognises the importance of their contribution through consultation. The Force is committed to ensuring the health and safety competence of all employees through regular appraisals and provides all necessary expert safety advice. It follows that all staff have a responsibility for non-employee's health and safety while on Police premises and that they are not adversely affected by our activities.

Safety performance is included in the Forces Annual Report and there is commitment to regular reviewing of all health and safety policies

POLICY DOCUMENT

2. ORGANISATION / RESPONSIBILITIES

2.1 The Chief Constable is ultimately responsible for everyone's health, safety and welfare and responsibility for implementation of the policy is placed on all managers. However, it is emphasised that each and every employee has a vital part to play in ensuring the health and safety of everyone within the Force.

2.2 The Assistant Chief Constable

2.2.1 The Assistant Chief Constable is responsible to the Chief Constable, for the implementation of the Health and Safety policy within the Force. In particular he/she will:

- (a) ensure that all employees are aware of their responsibilities and specific duties, and have the necessary training and authority to carry them out;
- (b) ensure that statutory requirements are met and that Regulations and Codes of Practice are observed; and
- (c) monitor the effectiveness of the Health and Safety Policy using the information available to them.

2.3 The Safety Co-ordinator

2.3.1 The Director of Corporate Services acts as Safety Co-ordinator. In this capacity he/she will:

- (a) advise the Assistant Chief Constable on situations or activities which are potentially hazardous to the health and safety of employees and others;
- (b) monitor the effectiveness of the Health and Safety Policy and revise, modify and update as necessary; and
- (c) ensure that all practicable steps are taken to comply with recommendations made by the Force Safety Adviser, Safety Representatives and the Health & Safety Committee.

POLICY DOCUMENT

2.4 **Divisional Commanders/Heads of Department**

2.4.1 Divisional Commanders and Heads of Department shall:

- (a) carry out that part or parts of the Force Health & Safety Policy which is/are relevant to their particular function;
- (b) ensure that all personnel under their control including any member of staff with a disability who may have particular needs with regards to health and safety, are conversant with and accept their responsibilities under the Force Health & Safety Policy and that they are trained and equipped to carry out those responsibilities;
- (c) ensure that Health and Safety receives full consideration in:
 - current day to day tasks,
 - planning new methods of work,
 - purchasing new machinery,
 - housekeeping standards.
- (d) ensure that all accidents are investigated and accident reporting procedures are carried out;
- (e) ensure that employees are adequately trained in safety matters in connection with their duties and the establishment generally;
- (f) ensure that risk assessments are prepared throughout their departments which identify all significant hazards and establish appropriate control measures to eliminate or reduce the risks involved; and
- (g) provide arrangements for communication and consultation with staff, their representatives and accredited safety representatives on health and safety matters.

2.4.2 In practice Divisional Commanders and Heads of Departments may delegate responsibility for safe systems of work within their own area. This is particularly the case in the operational sphere where responsibilities have been devolved to section level.

2.4.3 Divisional Commanders and Heads of Departments will ensure that a monthly Safety Inspection is carried out for each of their areas of responsibility and review the findings on a quarterly basis.

POLICY DOCUMENT

2.5 Occupational Health Providers

2.5.1 Occupational Health Providers, who report to the Director of Human Resource Services, deal with the two-way relationship between work and health. The service is as much concerned with the effects of the working environment on the health and safety of the worker as it is with the influence of that worker's own state of health on both physical and psychological fitness to carry out the various tasks of the job. By the very nature of the work they do, occupational health advisers inevitably see members of staff suffering ill health, some of which may be work-related, and some of which may even be safety-related. As the main thrust of the discipline is to prevent ill health rather than cure it, occupational health advisers will:

- (a) at every opportunity promote the concept of occupational safety being an attitude of mind which must be actively pursued by all members of staff;
- (b) bring to the attention of the Safety Adviser any shortcoming in organisational arrangements that comes to their attention, which indicates that safety may be compromised;
- (c) share involvement in training courses designed to ensure safe working practices;
- (d) after due consideration, report to the Director of Human Resource Services on individual unfitness to be at work, when this becomes apparent and that unfitness is such that the safety of the individual or work colleagues or members of the public is thereby put at risk;
- (e) make policy and practice recommendations to improve specific health and general safety developments within the Force
- (f) in conjunction with the Safety Adviser ensure safety issues are addressed in relation to specific health promotion campaigns.

2.6 The Safety Adviser

2.6.1 The Safety Adviser, who reports to the Safety Co-ordinator, is responsible for fostering and maintaining a safe working environment and safe systems of work on a day to day basis. They will endeavour to ensure effective implementation of the Force Health & Safety Policy, systems and procedures and monitor progress in these arrangements. In particular they will:

- (a) make random observations throughout the Force and make comment to the ACC, Safety Co-ordinator, Divisional Commander,

POLICY DOCUMENT

Head of Department or any other member of staff as appropriate, if any unsatisfactory situation is observed;

- (b) advise the ACC and Safety Co-ordinator of situations or activities which are potentially hazardous to the health and safety of employees and other users;
- (c) ensure that an annual survey is carried out to examine the state of workplace safety and fire protection;
- (d) ensure that where possible, serious accidents and dangerous occurrences are investigated and that action is taken to prevent a recurrence;
- (e) ensure that information on safety is distributed to all who may require it.

2.7 **The Corporate Services Manager**

2.7.1 The Corporate Services Manager, who reports to the Safety Co-ordinator, will:

- (a) ensure that all Force buildings and grounds are maintained in a safe condition;
- (b) ensure that Contractors employed by the Force carry out their work safely;
- (c) ensure that all members of staff within their jurisdiction are familiar with and comply with the Force Health & Safety Policy;
- (d) ensure that, "so far as is practicable", all members of staff within their jurisdiction receive training and are competent to carry out any tasks allocated;
- (e) ensure that all accidents are investigated and accident reporting procedures are carried out within their department;
- (f) ensure that Health and Safety receives full consideration in:

current day to day tasks,
purchasing new machinery,
housekeeping standards.
- (g) ensure that fire-fighting equipment is inspected and maintained in sound condition.

POLICY DOCUMENT

2.8 **Caretakers**

2.8.1 Caretakers, who report to the Corporate Services Manager, will:

- (a) maintain Force buildings and grounds so that they are clean, safe and without risk to health and safety;
- (b) ensure that access to and egress from Force buildings is unobstructed and available for free movement by employees and visitors;
- (c) maintain adequate heating, supply of hot water and other services within the buildings;
- (d) ensure that all persons under their control know and accept their responsibilities under the Force Health & Safety Policy and are trained and equipped to carry out these responsibilities; and
- (e) undertake job instruction and safety training as required.

2.9 **General**

2.9.1 All employees will:

- (a) be fully aware of the Force Health & Safety Policy, Safe Systems of Work, safe operating procedures, rules, regulations and specific job instructions for any work which they may undertake;
- (b) conform to the safe systems of work, rules and regulations operative within their fields of responsibility;
- (c) use only correct equipment and methods of work at all times;
- (d) report any defective plant, tools, equipment or other materials;
- (e) report without delay any hazard or unsafe condition which they may encounter in the course of their duties;
- (f) assist in the maintenance of good housekeeping standards;
- (g) co-operate fully with supervisory and managerial staff in the promotion of health and safety at work; and
- (h) undertake safety training as required.

POLICY DOCUMENT

3. ARRANGEMENTS

3.1 Health and Safety Committee

3.1.1 The Health and Safety Committee operates under the chairmanship of the Assistant Chief Constable.

The membership is as follows:

Assistant Chief Constable, Chairperson
Director of Corporate Services, Deputy Chairperson
One representative from Human Resource Services
One representative from each recognised Trades Union
One support staff representative from each Division
One representative from Baluniefield
An agreed number of Representatives from the Joint Branch Board of the Scottish Police Federation
A representative from the Association of Scottish Police Superintendents

3.1.2 Representatives from other areas may be co-opted as deemed necessary.

3.1.3 The Safety Adviser, Corporate Services Manager, Occupational Health Provider and other specialists as required will be ex-officio members.

3.1.4 The Committee Administrator records the minutes of the Health & Safety Committee meetings and ensures that these are distributed to appropriate staff.

3.1.5 The Force Health & Safety Committee will meet at least four times per year and has the following remit:

- (a) to make recommendations for such action as is thought necessary to ensure that reasonable steps are being taken to promote the safety of employees, authorised visitors and members of the public lawfully entering the precincts of the Force;
- (b) to receive reports from the Safety Adviser, Safety Representatives, Occupational Health Provider;
- (c) to review the results of safety inspections;
- (d) to review records of accidents and incidents;
- (e) to maintain liaison with organisations concerned with health and safety and,
- (f) to report annually to the Chief Constable.

POLICY DOCUMENT

3.1.6 Given the important role of Divisional Commanders as outlined in paragraph 2.4, the development of informal lines of communication with Safety Representatives and Health and Safety Committee members at Divisional level is to be encouraged.

3.2 Reporting Of Injuries, Diseases And Dangerous Occurrences

3.2.1 All incidents of injury, disease and dangerous occurrences which arise out of or in connection with work activities must be reported to line management as soon as possible after the incident, and in any case within 24 hours. Detailed procedures are contained in Appendices 1 & 2.

3.3 Emergency Procedures

3.3.1 All personnel should act in accordance with posted notices. Detailed procedures to be followed in the event of a fire being discovered are contained in Appendices 3 and 4.

3.4 New Plant and Machinery

3.4.1 When new plant or machinery is purchased or new processes introduced it is the responsibility of the Head of Department concerned, to ensure that all employees involved are adequately trained and competent to operate any of the new plant, machinery or process.

3.5 Storage of Inflammable or Hazardous Substances

3.5.1 Arrangements have been made for the provision of flameproof cabinets throughout the Force in which inflammable/hazardous substances must be stored.

3.5.2 Liquefied Petroleum Gas must be stored according to the Highly Flammable Liquids and LPG Regulations 1972.

3.5.3 All other hazardous materials held on Force premises shall be stored in accordance with the Regulations and Codes of Practice currently in force and or in accordance with manufacturers' instructions.

3.6 First Aid

3.6.1 A list of designated First Aiders and appointed persons will be displayed in each station.

POLICY DOCUMENT

3.6.2 First Aid Boxes are located in a number of offices, laboratories, and workshops throughout the various stations.

3.7 **Safety Audits**

3.7.1 Safety Audits using the RoSPA QSA model will be undertaken by the Safety Adviser and every three years be carried out by Safety Advisers from other Police Forces.

3.8 **Training**

3.8.1 The Chief Constable will ensure that necessary training in safety matters takes place for all employees.

3.8.2 It is the responsibility of managers to ensure that all employees are adequately trained to perform the duties of their posts safely. If special training due to technological change is required this must be made known to Human Resource Services which, in conjunction with the manager concerned, will make appropriate arrangements to provide training.

3.9 **Control of Substances Hazardous to Health (COSHH)**

3.9.1 The COSHH Regulations 2002(as amended) deal with substances which are deemed as being hazardous to health e.g.,

substances defined as:

- very toxic
- toxic
- harmful
- corrosive
- irritant

3.9.2 Employees in the Force are not exposed to hazardous substances to the same degree as industrial and other workers, however the comprehensive nature of these regulations insist that adequate identification and control measures must be implemented.

3.9.3 Divisional Commanders and Heads of Departments are to ensure that COSHH assessments are completed (where applicable) and reviewed annually.

3.9.4 Assessments are to be maintained in departmental files.

3.9.5 Assessments must be reviewed if:

POLICY DOCUMENT

- (a) there is any reason to suppose that the original assessment is no longer valid; or
- (b) if any of the circumstances of the work should change significantly;
or
- (c) a new substance is introduced.

3.9.6 The Safety Adviser and Occupational Health Nurse Adviser are available to advise on assessment procedure.

3.10 **Risk Assessment**

3.10.1 Departmental risk assessors will identify all significant hazards within their area.

3.10.2 Departments will then prepare a formal written risk assessment identifying the control measures to be taken in respect of each significant hazard.

3.10.3 A volume of generic risk assessments (GRAs) applicable to police work is available as part of the Scottish Office guidance. The GRAs may be found on the Force Intranet/Library/Health and Safety/Generic Risk Assessment Forms.

3.10.4 The Force Safety Adviser is available to give further guidance in the preparation of risk assessments.

3.11 **Safety Representatives**

3.11.1 Safety Representatives are appointed under the following Regulations :

- (a) Safety Representatives and Safety Committee Regulations 1996
- (b) Health & Safety Consultation with Employees Regulations 1996

3.11.2 Safety Representatives have the following functions :

- (a) Investigate employee's complaints, relative to health, safety and welfare at work;
- (b) Make representation to the employer on matters of health, safety and welfare at work;

POLICY DOCUMENT

- (c) Investigate locally, potential hazards and dangerous occurrences and examine the cause of accidents at work:
- (d) Following reasonable notification - carry out local safety inspections;
- (e) Attend safety committee meetings
- (f) Represent groups of employees in consultation with inspectors of the Health & Safety Executive;

3.11.3 No function given to a safety representative shall be construed as imposing any duty on them.

3.11.4 Safety representatives are allowed to take such time off with pay during the employee's working hours as shall be necessary for the purposes of :

- (a) Performing their functions under section 2 (4) of the HSWA 1974 and paragraph 4.2 (a) to (f) above.
- (b) Undergoing such training in aspects of those functions as may be reasonable in all the circumstances having regard to any relevant provisions of a code of practice relating to time off for training approved for the time being by the Health and Safety Commission under section 16 of the HSWA 1974.

POLICY DOCUMENT

Appendix 1

Accident Reporting Procedures

Procedures to be adopted by employees in the event of an incident causing injury.

- 1 Staff should make a judgement as to whether:
 - (a) The injury is minor;
e.g., can be treated by a first aider or appointed person.
 - (b) The injury is serious;
e.g., necessitates hospital treatment.
- 2 Having determined the category of injury take the following action;
 - (a) If of a minor nature initiate treatment and call for a first aider or appointed person.
 - (b) If considered major call for an ambulance to take the person to hospital. Call for a first aider or appointed person to assist.
- 3 As soon as possible after the incident, the injured person or their representative must obtain and complete a report using form ADM.26. The form can be accessed through your normal network passwords via the SCOPE computer application found within the F.O.C.U.S application suite. Once into the SCOPE system click on the ACCIDENT MANAGEMENT icon, then click on ADD 'VIOL/ACC' RECORD a user guide to assist in completing the form is available in 'Personal Help'.

All reported incidents are viewed by the Safety Adviser and Chief Inspectors Support as well as the Federation provided that consent has been given.
- 4 If an incident results in serious injury the local safety representative should be informed.

POLICY DOCUMENT

Appendix 2

Reporting of Injuries, Disease and Dangerous Occurrences

- 1 All occupational diseases and dangerous occurrences must be reported through line management using form ADM26.
- 2 Completion of the form is an individual responsibility, however, if an individual is unable to do this, because of injury or hospitalisation, then a responsible person, representative or line manager must do this on their behalf. The form must be completed as soon as possible and not later than 24 hours after the incident.
- 3 The line manager will ensure that details have been entered into the accident record book.
- 4 An accident includes:

“...any unplanned event in a sequence of events that occur through a combination of causes; it results in physical harm (injury or disease) to an individual, damage to property, a near miss, a loss, or any combination of these effects.”
- 5 Diseases include:

Carpal tunnel syndrome, hepatitis, leptospirosis, tetanus, asbestosis and occupational dermatitis.
- 6 Dangerous Occurrences include:

Collapse of scaffolding, explosions, breathing apparatus malfunctions and escapes of flammable substances.

POLICY DOCUMENT

Duties of Designated Staff

Evacuation Procedures to be Adopted in the Event of Fire:

- 1 **Emergency Reporting Officer (ERO)** A senior member of staff, nominated person or caretaker will act as the ERO. In relation to Dundee this will be the Senior Officer in the control room, in Perth it will be the Senior Officer in the PEO, who is to ensure that :
 - (a) the fire alarm has been sounded,
 the Fire Brigade has been called,
 the building or appropriate area of the building has been evacuated.
 - (b) uplift the fire evacuation checklist and put on the fluorescent waistcoat;
 - (c) wait at the appropriate assembly point and receive reports from the Floor Stewards (if applicable):
 - (d) report to the Fire Brigade on their arrival;
 - (e) when the building(s) have been evacuated decide (if applicable) whether employees should be dispersed and, if so, what instructions, if any, should be given about re-assembly;
 - (f) issue instructions for re-occupation of the building(s) when the Fire Brigade have given the all clear;
 - (g) send a report of the incident to Corporate Services Manager as soon as possible;
 - (h) ensure an entry is made in the Fire Log Book.

- 2 **Floor Stewards**
 - (a) Floor Stewards are responsible for checking that their designated area or floor has been evacuated;
 - (b) they must then report this information to the ERO.

- 3 **Caretakers**
 - (a) Call the Fire Brigade;
 - (b) in stations with lifts, call the lift to the ground floor and isolate to render them inoperable.

POLICY DOCUMENT

Fire Evacuation Procedures

- 1 Make sure that you are familiar with the procedures as detailed in the FIRE INSTRUCTION NOTICES posted throughout the Force.
- 2 Make sure that you know the location of the various fire exits and assembly areas as well as the location and method of operation of the fire alarm and the fire fighting appliances in your work area.
- 3 It is essential that employees take responsibility for the safe evacuation of visitors.
- 4 Any disabled employee or visitor must be assisted out of the building. In headquarters Dundee and sub-divisional headquarters Perth a special chair is available for the safe evacuation of any disabled person.
- 5 DO NOT RETURN to the building until instructed to do so by the ERO.
- 6 When proceeding to assembly areas, in order to avoid accidents, employees must exercise care when crossing any access road. Roads must be kept clear for the arrival of the Fire Brigade.
- 7 Designated Floor Stewards, where applicable, will search the various floors of each building to ensure that all rooms have been evacuated.

They must then report to the ERO that their area is clear or not as the case may be.
- 8 Liquid Petroleum Gas Cylinders (LPG)

Normally LPG cylinders should be left in situ, but if the fire is in an area where LPG cylinders are in use or stored, these cylinders should be removed to a place of safety if possible. The ERO must be informed of the situation. They will then inform the Fire Brigade on their arrival.